



Continuous Quality Improvement Initiative - Interim Report 2024

Omni Quality Living – Bear Creek Terrace

Quality Improvement Lead – Lyndsay Aird, Administrator

Overview

At Omni Quality Living – Bear Creek Terrace, we believe that each step taken in our quality journey is a step closer to providing our Residents with the highest standard of excellent care. Overall, our Quality Improvement goals and objectives are intended to enable change so that improvements can be realized. Our QIP aligns with strategic and operational plans as we focus on change management; creativity in the development and implementation of unique Resident programs and fostering a culture of making a difference at the front line.

Our Quality Improvement Program has a strong focus on safety, well-being and overall quality Resident experience.

Setting Priorities

It is recommended that indicators where performance has been below organizational goals or provincial benchmarks be given the strongest consideration. High priority indicators must be closely aligned with organizational strategic priorities and will receive a greater emphasis in terms of change plans and resources for implementation than lower-priority indicators. When results have been sustained at rates that are consistent with organizational goals or performance is at or near theoretical best, a lower priority rating is to be considered.

Calculating Priorities

Omni Quality Living uses a tool called a Priority Calculator to determine which improvements will have the biggest impact on helping to realize its quality improvement goals. The priority calculator helps the Home decide where to focus time and effort on Quality Improvement. This tool enables Omni to make strategic choices about which quality improvement activities the Home will plan to undertake.

The Priority Calculator lists a set of questions that are grouped into three categories:

- **Impact:** The questions in this section focus on identifying a quality problem that is common, whether it has consequences for Residents, if it has an impact on related areas, if there is a gap between the current and desired state, the costs to the organization and if the problem constitutes a business case. (Scale of 1-8)

- **Ease of implementation:** The questions in this section focus on a quality problem for which there is already a good change package, measurement tools available or in use, the successes achieved by other LTC homes and the change ideas that are actionable by the LTC home staff. (Scale of 1-8)
- **Alignment:** The questions in this section ensure that the organization's efforts are focused on a quality problem that is aligned with the provincial priorities, accountability agreements, public reporting and organizational strategic plans. (Scale of 1-10)

The impact and ease of implementation questions are rated on a scale from 1 to 8, while the alignment questions are rated on a scale from 1 to 10.

Alignment questions are given more weight to ensure that LTC home leaders focus on quality topics that are aligned with provincial priorities and organizational strategic plans.

The Priority Calculator is reviewed and updated annually, at minimum and posted in the Home on the Quality Improvement Communication Board.

Monitoring and Measurement

Omni Quality Living monitors and measures progress on home specific, organization specific and provincial priorities. Quality Improvement meetings are scheduled monthly and expanded on a quarterly basis to include key stakeholders, including Residents, families, and other interested parties. Clinical and non-clinical indicators are reviewed at each meeting and measured against established benchmarks, such as organizational and provincial averages or benchmarks, goals and aim statements. Meeting Minutes, Quality Indicator Reports and Topic Specific Plans are all posted in the Home on the Quality Improvement Communication Board.

Clinical Indicators

Omni Quality Living provides each Home with a comprehensive and comparative quarterly corporate report of clinical indicator data for all Omni Homes based on the RAI-MDS data for that quarter. The following Clinical Indicators are monitored and measured:

- Symptoms of Delirium
- Use of Anti-Psychotics without a Diagnosis of Psychosis □ Falls
- Stage 2-4 Pressure Ulcer, New Stage 2-4 Pressure Ulcer, Worsened Stage 2-4 Pressure Ulcer
- Daily Physical Restraints
- Pain, Worsened Pain

Topic specific quality improvement plans are developed for any clinical indicator at or above the provincial average.

Non-Clinical Indicators

Each Omni Home also reviews home-specific non-clinical indicators each quarter. The following Non-Clinical Indicators are monitored and measured:

- Number of ED Visits
- Resident and/or Family Complaints
- Legislative Compliance
- Staffing – 24/7 RN Coverage, Staffing Shortages, Agency Use
- Surge Learning
- Outbreak Status
- Critical Incidents

Resident Experience Surveys

The home's Residents and/or Substitute Decision Makers had the opportunity to participate in the completion of the annual Resident Experience Survey from November 7, 2023, to December 18, 2023. This survey solicits feedback from Residents regarding the level of satisfaction with the care and services provided and gives Residents and their families an opportunity to communicate suggestions for improvement for programs and services offered in the Home.

The compiled results of the survey responses, as well as a home specific Commentary Report, were provided to the home on February 26, 2024, by our partners at Metrics@Work. The home reviewed the results of the Resident Experience Survey and worked together to develop a Continuous Quality Improvement Action Plan for areas with a satisfaction result of less than 80% positive response rate. The home's CQI Action Plan was submitted to Omni Quality Living on March 15, 2024, for review.

The Administrator presented the Resident Experience Survey Results, as well as the home's Continuous Quality Improvement Action Plan, to members of the Residents' Council on March 28, 2024 at their monthly meeting. The survey results and the home's CQI Action Plan was also communicated with members of the staff on March 17, 2024.

The home communicated with Families on March 27, 2024, that the Survey Results had been received and were posted along with the home's specific CQI Action Plan on the Family Board. Residents and Families were advised that if they would like a copy of the Survey and Action Plan, or if they had any questions, to speak with the Administrator.

Priority Areas for Quality Improvement

Omni Quality Living – Bear Creek Terrace has identified the following 3 areas as the top priorities for Quality Improvement:

Priority #1 – Recruitment & Retention

Priority #2 – Improvement in Communication

Priority #3 – Resident & Family Engagement

Continuous Quality Improvement Process

Quality Improvement is achieved through the Quality Matters Program at Omni Quality Living. Once priority areas for improvement are identified, Omni Quality Living – Bear Creek Terrace undertakes the process for improvement in alignment with organizational policy and the Model for Quality Improvement, including use of the PDSA (Plan-Do-Study-Act) Cycle.

The following is a brief summary of the QI Plan for these priority areas. Complete plans and are available for review in the Home or by contacting the Quality Improvement Lead in the Home.

Priority #1 Recruitment and Retention

We are currently actively recruitment for PSW's, RPN's and RN's for all units within the residence. We are committed to providing timely, safe and effective care for all our residents to ensure a safe and happy environment for them to reside in.

We have been recruiting through online postings, attending job fairs, maintaining our affiliations with local colleges by hosting students for their clinical placements, and offering referral incentives to internal employees. We have also implemented an Attendance Management Program to assist our employees in managing their schedules.

Our main goal is to minimize the number of times units work without the allotted number of staff as per the Master Schedule by ensuring all positions are filled.

As part of our recruitment efforts, we are promoting the OMNI Health Care Bursary Program, which assists our staff in achieving their goals of higher education.

Priority #2 Improvement in Communication

We are committed to improving our communication with residents, family members, and staff members by utilizing tools meant to increase our engagement. We will be utilizing working, shared documents such as action plans to communicate how we are tackling concerns, which will be updated weekly. We are utilizing online applications within our organization to provide information for front line staff that they may check daily for updates. We have recently updated our communication board for staff to view each day with new information to be posted at least weekly or as needed. We strive to maintain transparency and effective communication with all members of our care team including resident, their family members, and our front-line staff. We maintain an open-door policy that allows our residents, their family members and our staff to share concerns in a safe space, while knowing that we will follow-up in a timely manner with an answer.

Priority #1 Resident & Family Engagement-

We believe that our Residents' families must be active partners in their care. We welcome them as part of the circle of care and as advocates for their loved ones' overall quality of life.

We have a very active and involved Family Council that we meet with monthly to discuss any concerns they may have. We have recently created an Action Plan that is meant to respond to each concern with a plan of rectification. This is a shared document that the president of the Family Council will be able to review with our updates. We also plan to continue with monthly newsletter, and we plan to update our communication boards more often with the most up to date information.

The plan for improvement includes increasing our communication and updated our response to meeting concerns that the family council feels is most effective.

Summary

OMNI Health Care is committed to promoting a Person-Centred culture of quality. Our Quality Matters program incorporates the principles of quality improvement to monitor, measure, evaluate, plan and implement continuous improvement initiatives.

For more information about the OMNI Quality Matters Program, contact Lyndsay Aird, Administrator @ 519-882-0370 ext. 101